

Maine Historic Properties CAPITAL NEEDS SURVEY

Please return this survey by April 9, 2004

to the Maine Historic Preservation Commission,

55 Capitol Street, State House Station 65, Augusta, Maine 04333-0065

Phone (207) 287-2132

www.Maine.gov/mhpc

Fax (207) 287-2335

PROPERTY INFORMATION

Property Name: _____

Address: _____

City: _____ Zip Code: _____ County: _____

Property Type: ☐ Building ☐ Archaeological Site ☐ Landscape
☐ Other: _____

Is the property listed in the National Register of Historic Places? ☐ Yes ☐ No
Date listed: _____ (If No, please complete a National Register Information Request form available from MHPC.)

PROPERTY OWNER

Owner's Name: _____

Ownership: ☐ Public-State ☐ Public-County ☐ Public-Municipal
☐ Private Non-Profit ☐ Private-(Archaeological only) ☐ Educational Institution

Principal Contact: _____

Address: _____

City: _____ Zip Code: _____ County: _____

Telephone Number: _____ Fax Number: _____

E-mail Address: _____ Website: _____

RESPONDANT INFORMATION (If different from above.)

Name: _____

Organization: _____

Address: _____

City: _____ Zip Code: _____ County: _____

Telephone Number: _____ Fax Number: _____

E-mail Address: _____ Website: _____

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DESCRIPTION OF CAPITAL NEEDS

Please identify the preservation and repair work that needs to be addressed at your historic property by checking all appropriate boxes. Prioritize the capital needs of your historic property, with (1) being the most immediate need and provide an estimated cost for the work.

Priority	Area of Need (check all that apply)	Est. Cost
	Drainage Maintenance / Repair <input type="checkbox"/> gutters <input type="checkbox"/> downspouts <input type="checkbox"/> perimeter drains <input type="checkbox"/> grading at building <input type="checkbox"/> vegetation removal <input type="checkbox"/> dry wells, swales	
	Roof Maintenance / Repair <input type="checkbox"/> roofing material <input type="checkbox"/> flashing <input type="checkbox"/> cupolas <input type="checkbox"/> chimneys <input type="checkbox"/> lightning protection <input type="checkbox"/> cresting or finials	
	Exterior Walls Maintenance / Repair <input type="checkbox"/> siding <input type="checkbox"/> painting walls, trim <input type="checkbox"/> remove synthetic siding <input type="checkbox"/> masonry repointing <input type="checkbox"/> windows <input type="checkbox"/> doors <input type="checkbox"/> cornice, trim <input type="checkbox"/> storm windows <input type="checkbox"/> porches	
	Structural Maintenance / Repair <input type="checkbox"/> foundation <input type="checkbox"/> posts / footings <input type="checkbox"/> framing: sills, trusses <input type="checkbox"/> tower framing <input type="checkbox"/> masonry piers <input type="checkbox"/> buttresses or arches	
	Interior Maintenance / Repair <input type="checkbox"/> finishes <input type="checkbox"/> plaster repair <input type="checkbox"/> historic fixtures <input type="checkbox"/> heating <input type="checkbox"/> electrical <input type="checkbox"/> plumbing <input type="checkbox"/> hazardous materials abatement	
	Accessibility and Barrier Removal <input type="checkbox"/> exterior access <input type="checkbox"/> interior access <input type="checkbox"/> lift or elevator <input type="checkbox"/> path of travel <input type="checkbox"/> bathroom <input type="checkbox"/> hardware	
	Archaeological Site Preservation <input type="checkbox"/> legal protection <input type="checkbox"/> physical protection <input type="checkbox"/> site stabilization <input type="checkbox"/> documentation <input type="checkbox"/> artifact conservation <input type="checkbox"/> intensive survey	
	Cultural Landscape Preservation / Restoration <input type="checkbox"/> paths, trails <input type="checkbox"/> vistas <input type="checkbox"/> gardens <input type="checkbox"/> plantings/trees <input type="checkbox"/> site stabilization <input type="checkbox"/> constructed elements	
	Other <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	
Total Need		

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List all relevant reports, including Conservation Assessment Program (CAP) reports, Historic Structure Reports (HSR), Cultural Landscape Reports, Archaeological Surveys or other condition assessments for the subject historic property, and the date when they were completed.

Please answer the following questions as applicable to the historic property:

Annual Visitation Total _____ In-state _____ Out-of-state _____

Do you have an endowment or trust fund that supports the maintenance of the property?

☐ Yes

☐ No

☐ N/A

If yes, how large is the account?

☐ 0-\$50,000

☐ \$50,000-\$100,000

☐ \$100,000-\$200,000

☐ \$200,000-\$400,000

☐ \$400,000-\$800,000

☐ \$800,000-1 million +

What are your annual operating expenses for this property? _____

Does this property have a current Emergency Response Plan?

☐ Yes

☐ No

☐ N/A

Use the space below for any additional comments:

Thank you for your help!

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